POS!TION	INITIALS	ID NO.	DATE
	SF		10-501
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		~21	, .
FORMALITY REVIEW	7	1061	11/05/01
RESPONSE FORMALITY REVIEW	/-		1

INDEX OF CLAIMS

•	Rejected	N	Non-elected
=	Allowed	ł	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

÷ Restricted 0 Objected								
Claim Date	Claim	Date	Claim	Date				
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18 / /	68		118					
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43	93		143	 				
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46	96		146					
47	97		147					
48	98		148					
49	99		149	 				
50	100		150	<u> </u>				

If more than 150 claims or 10 actions staple additional sheet here

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